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ABSTRACT

This brief pamphlet on teenage alcoholism is one in a series published by the Public Affairs Committee. It was designed to give concise and useful information on teenage alcohol problems, and was written for both adults and youth. Statistics are offered as proof that large numbers of American teenagers are already problem drinkers. The current trend in drug use is shifting back toward alcohol, away from experimental drug substances. The pamphlet deals directly with issues such as why youngsters drink, and it arrives at several conclusions on the topic: (1) adult acceptance; (2) search for adulthood; (3) personal problems; and (4) disapproval by adults. The latter section of the text relates suggestions on what can be done by parents and others who are concerned about alcohol abuse, and offers a set of specific rules for parents who want to teach their children how to drink. (Author/PC)

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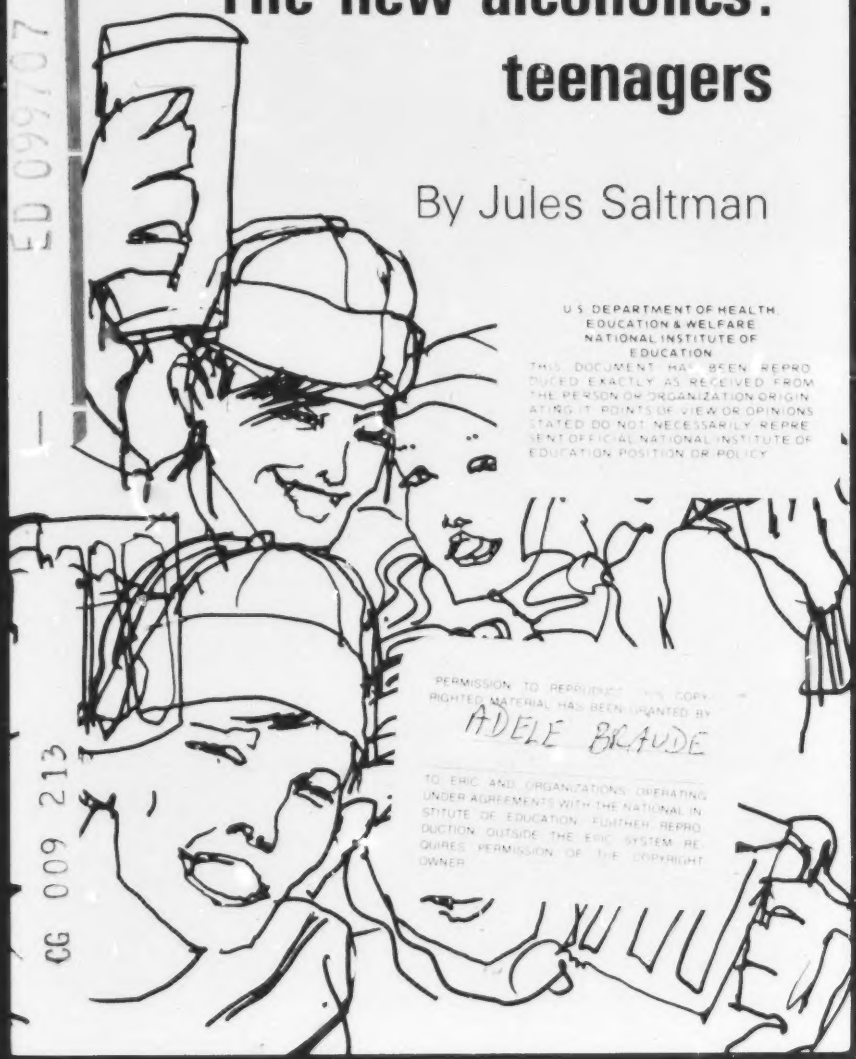
The new alcoholics: teenagers

By Jules Saltman



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The new alcoholics: teenagers

By Jules Saltman

Jules Saltman is a well-known writer on medical and health subjects and the author of several Public Affairs Pamphlets, including What About Marijuana? *and* Drug Abuse—What Can Be Done? . . . *Illustrations by Anna Marie Magagna.*

- In 1960, according to the crime reports collected by the Federal Bureau of Investigation, 13,537 arrests of youngsters under eighteen were made for drunkenness or for driving while intoxicated. By 1971 the number had risen to 31,173, well over twice as many.
- In a recent roundup of unruly college students on a summer weekend at a New Jersey shore resort, only a handful of the more than 100 arrests were on marijuana charges. The rest were for drunkenness.
- In a current methadone program for heroin addicts at Bellevue Hospital in New York City, more than half the patients—most of them young—while they are abstaining from heroin, are drinking heavily instead.

These are the visible signals in a new turn in the problem of young people at odds with the society around them: a shift from drugs to heavy drinking and even alcoholism—not only among youths but among children fourteen, thirteen, twelve years of age and younger.

young drinkers

Not that drinking among teenagers is a new thing. Drunkenness arrests in the under-18 category were occurring long before 1960.

Indeed, before the upswing in drug abuse of all kinds that became visible in the early 1960s and rose higher in the ten years that followed, excessive drinking among youth was a major concern of parents—what [illegible]nelle Fox, Chief of Alcoholism Services, Long Beach General Hospital in California, calls "the bone of contention in the dog fight between the generations." The fourteen-year-old who came home drunk from a party, the teenager who wrecked the family car while blurry with alcohol, the college student in trouble with school authorities for drinking—these were the offspring parents complained about in the 1940s and 1950s.

Then, "when drugs came on the scene, alcohol became square," says Yvelin Gardner of the National Council on Alcoholism (NCA). The horrors of heroin and of other drug addictions and the rapid spread of marijuana use by children overshadowed the alcohol problem for a while—but only in terms of the emotions aroused in parents and other adults. Even at the height of the drug epidemic, alcohol remained the greatest drug phenomenon in terms of numbers of users, actually growing bigger all the time. Although few people think of alcohol as a drug, it is the most common drug of physical as well as psychic dependence. Now alcohol is emerging once more as the number one drug-use problem of young people—as it always has been of adults—almost putting even hard-drug addiction in the shade.

"The current trend in drug use by youth," says Dr. Fox, "is shifting back toward alcohol as the drug of choice. It appears that we are passing the peak of drug experimentation and are leveling out with a more chronic use pattern of mixed substance abuse, with alcohol quite prominent in the picture."

But the way young people are using alcohol seems to some

observers to be significantly different today. It seems apparent that youngsters are drinking to get high, whereas years ago they drank to be "smart," to show that they were grown up. And for some the emphasis is on drinking to block out the troubles and pressures of the world—as is true among many adults today, too.

drinkers and drunks

Drinkers, whether teenagers or adults, are not all drunks, of course. The figure of an estimated 9.6 million problem drinkers, many of them alcohol addicts, is only a fraction of the 95 million American adults who drink, most of them with regularity. The same distinction must be made with regard to teenagers, although the comparable figures are not known. However, in a national survey made by the President's National Commission on Marijuana and Drug Abuse, which found that over half the adults questioned had used alcohol within the previous seven days, the corresponding figure for young people was almost one-quarter.

There are teenagers who are heavy drinkers, and the spectacle is an appalling one. But there are no estimates on how many are heavy drinkers and how many can be classified as addicted users —*alcoholics*.

Perhaps not many youngsters have had time to become outright alcoholics, but all too many are *problem drinkers*—people who drink frequently, to excess, to the stage of drunkenness, and who get in trouble because of alcohol.

numbers

In the late 1960s, observers were reporting that large numbers of young people were dropping alcohol in favor of marijuana smoking. But in 1970, William W. Moore Jr., of the NCA, found that marijuana was still running "a distant second" to alcohol among drug users on college campuses.

More recent studies, according to Dr. Morris E. Chafetz of the National Institute on Alcohol Abuse and Alcoholism, have shown that 75 percent of high school students say they have taken alcoholic beverages more than once before graduation (at age 17 or 18) and one-third state they drink with some regularity. A 1969 Gallup poll found about the same proportions true of college

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students, with well over half of those questioned answering "Yes" to "Have you ever drunk more than you should?"

Every study finds that, starting with the striking number who begin drinking at twelve or thirteen, the proportion of drinkers grows larger in every age group through the high school and college years (and on into young adulthood).

No group has more drinking problems than men 21 to 24 years old, says a professor at the University of California at Berkeley. In a study group carefully selected as representative of the U.S. male population, the over-21s led all the rest in alcoholism.

Economic status also had a marked effect on the number of drinking problems. In the 21-to-24 age group, 55 percent of those at the lowest socioeconomic level had such problems. The rate was about 25 percent in higher income groups. After age 24, the percentage of alcoholics at all economic levels declines as the groups in the drinking population being considered get older.

WHY YOUNGSTERS DRINK

Why do youngsters drink and, especially, why do some drink heavily? Is it chemistry, alienation, defiance of their parents, overwhelming emotional

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and personality problems, or just the manners and customs of their society? Is it a result of the same susceptibility and impulses that lead to the use of other drugs, which alcohol may be replacing?

adult acceptance

Teenage drinking seems clearly related to all those factors—and, even more clearly, to the fact that drinking is widely accepted and practiced by adults.

When questioned about their first drink, many youngsters say that it was taken at home with the approval of their parents. Others are started by their friends, generally also with adult knowledge and, often, permission.

In many social, national, and religious groups, the drinking of alcohol is an accepted practice for young and old alike. Among Jews, for example, wine-drinking has a religious connotation on

several occasions in the year. People of French or Italian background generally have wine on the table at mealtimes for all ages. In other social groups, beer is a general beverage. In some families, drinking parents even permit their youngsters hard liquor.

The freedom to drink established by ethnic drinking habits does not always have similar results. Jews, Chinese, and Italians, who habitually drink a good deal, have a low ratio of alcoholics. Yet they probably drink as much as do the French (in France) and the Irish, also heavy drinkers as a group, both of whom have much alcoholism, and much illness and other problems related to their drinking.

Among Kentucky mountain people, another group in which drinking is an accepted practice, half the junior high and high school students polled in a survey of seven counties considered themselves "drinkers." And their drinking was unusually heavy, reckless (it included Sterno and paint thinner), and led to trouble. A large number admitted to drinking several times a week, 45.2 percent had gotten into fights or destroyed property while drinking, and 28.3 percent had been injured or arrested because of their behavior while drinking.

The difference between those groups that have problems with drinking and those that do not seems to lie not so much in the extent of their drinking as in how and why they drink.

search for adulthood

In an atmosphere in which alcohol is taken for granted, young people start drinking for relatively uncomplicated and largely social reasons. Scientists George L. Maddox and Bevode C. McCall of Duke University, after surveying thousands of youngsters, decided that many teenagers begin to drink as part of their normal efforts to take on the role of adults. Since adults approve of drinking and practice it freely in their presence, young people come to regard drinking as a badge of adulthood, and among boys as an evidence of virility. In addition, youngsters point out that the legal drinking age is going down in many states, the armed forces permit young servicemen to drink, and alcohol is widely praised in advertising. Therefore, they say, it must be both desirable and harmless.

Asked why they thought adults drank, teenagers told Drs. Maddox and McCall that it was mainly for sociability and self-expression and to bring down their feelings of anxiety. Asked the same with regard to themselves, the youngsters again stressed sociability and self-expression, making little mention of reducing anxieties. Some, but not many, said they drank because their friends expected them to.

Much teenage drinking, however, does seem to be due to pressure from friends. In one region of North Carolina, many people, including the young drinkers themselves, believe that drinking is wrong. In a recent survey, of those youngsters whose parents opposed drinking and whose friends abstained, only a little more than one out of ten drank. However, almost nine out of ten of those whose parents condoned drinking and whose two best friends drank, were drinkers. Even among young people who abstained completely, almost three-quarters of those who had drinking friends confessed to having been pressured into tasting alcohol at least once.

problems

On the whole, a social atmosphere of permissiveness and even of encouragement of teenage drinking—or simply the availability of alcohol—does not of itself lead to a large number of drinking problems. In a study of close to 3,400 high-school boys in Boston, nine out of ten had had "a drinking experience" and more than half were regular light to moderate drinkers. About one-fifth drank heavily, though they suffered few adverse consequences, and only 2 percent were considered problem drinkers.

Often, of course, the apparent absence of problems may only mean a particular social group does not recognize "problems" in commonplace drinking behavior. Nor does it apply the pressures that would create difficulties. One observer of a group of middle-class high-school boys in Canada found that many drank at parties (65 percent of those age 15 and over) and many had done so to the point of feeling "high," but difficulties were few. "Drinking occurs typically in a spirit of sociability and fun," says Dr. E.W. Vaz, "and in circumstances in accord with legitimate activities of the middle-class youth culture." Dr. Vaz suggests that such "middle-

class delinquency (of which drinking is one measure) does not appear malicious in motive or violent in character. It causes little damage, rarely attracts police attention, and is not likely to be discovered or taken seriously by adults."

disapproval

The story is different when the social atmosphere is one of disapproval of drinking, one in which most adults abstain. Here proportionately fewer young people drink, but those who do are disobeying their parents and the precepts of their society. Their drinking is an emblem of active rebellion—and they have more trouble as a result of it.

In one community in rural Mississippi, where drinking is frowned upon, only 27 percent of the youngsters studied were classified as "drinkers," but their drinking was often uncontrolled. Aside from not having parental permission, most of these drinkers belonged to churches that condemn alcohol on moral grounds, had to get their alcohol illegally from bootleggers, and tended to drink in secret with their drinking friends. Under these high-pressure conditions almost half the drinkers (42 percent) drank "frequently"; 28 percent drank "excessively," admittedly in an attempt to relieve their tensions; and 64 percent experienced social and personal complications because of their drinking.

WHY PROBLEM DRINKERS?

There are many reasons why young people drink. The big question is why so many of them have problems with their drinking.

Are young people more susceptible to the effect of liquor than adults? This has not been definitely proved, although it would seem logical and there is some scientific evidence of it. Because of their smaller size and their inexperience with alcohol, youngsters may feel the effects of alcohol more quickly and more strongly than adults drinking similar amounts. One study of fatal car crashes found that teenage drinkers were more likely than older persons to be responsible for the crashes they were in. Moreover, they tended to have their crashes with less alcohol detectable in their blood.

Also, of course, all teenagers are going through a period of

particular stress and uncertainty. Generally speaking, they are less likely than adults to exercise judgment and restraint. These may be major reasons why for so many of them drinking results in damage. "The impact of adolescence is often more than a teenager can handle on an e n keel," says writer Jean Libman Block. "Add alcohol to that pr arious balance and the results may be disastrous."

For a few problem drinkers, it may be simply a matter of chemistry, though that has not been apparent to investigators. The chemical theory of alcoholism—the theory that in some people a metabolic susceptibility will inevitably result in alcoholism after a few drinks have established the allergy—is not so widely held as it once was.

Metabolic changes do take place in a heavy drinker, but it is no longer considered certain that thereafter one drink will lead inescapably to a drunken episode. Members of Alcoholics Anonymous do hold, however, that for an alcoholic one drink is likely to be followed by others and will lead to a return to dependence on alcohol. While there is some evidence of a connection between alcoholism and heredity, not many youngsters who are well balanced and self-controlled seem to become problem drinkers solely because of their body chemistry.

personality factors

One likely explanation for alcoholism that seems preordained, once drinking starts, is a personality factor, even in very young children, or perhaps a psychological aberration. Youngsters who become alcoholics, Dr. M.M. Glatt of Great Britain believes, have a clear maladjustment of personality and even psychopathology (mental illness) before they start. For such youngsters, it seems not to matter when they have their first drink. Even if it is after they have grown up, they very likely will develop alcoholism.

"Young alcoholics are emotionally much more disturbed than the average adult alcoholic," Dr. Glatt says. "The early signs of dependence on alcohol develop very rapidly; alcohol releases hostility with which the young alcoholics seem to have great difficulty in coping. Frequent amnesias, morning and solitary drinking, and prolonged drunkenness at an early age suggest some psycho-

pathological factors in the make-up of such individuals."

Such youngsters are different from those who drink socially. "The young alcoholic is distinguished from normal adolescent drinkers," Dr. Glatt observes, "by early use of alcohol for its effect, and often in solitude, rather than as an aid to social acceptance. The ensuing abnormal drinking patterns seem to be an attempt to short-cut to an adult role, supplying a false feeling of omnipotence to the disturbed personality acting out his inadequacy."

This is putting it strongly, and perhaps most observers would not agree to classifying many young drinkers as mentally ill. But there is no doubt that personality factors and emotional maladjustments of various kinds are involved.

Clearly, the same struggle with problems—emotional, social, psychological, and personal—that causes other youthful difficulties causes some teenagers to become heavy drinkers. In any survey of delinquent versus nondelinquent youngsters, many more of the delinquents are heavy drinkers. Drinking "several times a week" was reported by 29 of 100 state school inmates in a Utah survey, but by only 5 of 100 senior high-school students. (Incidentally, the seniors took their first drink, on the average, at fourteen; for the state school inmates the average age at first drink was eleven.)

Children who will become problem drinkers in later life can be identified by their personality traits in junior high school, says research associate Mary Cover Jones of the University of California at Berkeley. In data collected over 37 years, boys who became problem drinkers showed very heavy emphasis on masculinity, perhaps because of their concern about the male role. Their behavior was likely to be unstable, unpredictable, and impulsive. Women who drank too much tended, as teenagers, to be depressed, self-negating, and distrustful.

Many experts see the roots of drinking problems in a complex interaction of physiological, psychological, and social factors.

rebellion

As demonstrated in social atmospheres where drinking is condemned, teenage over-drinking is often related to defiance of the authority of parents and society. In a group of North Carolina high-school boys, all of whose fathers were opposed to alcohol,

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drinking was greatest among youths who were in conflict with their fathers, in contrast with the behavior of those friendly to their fathers. "The rejection of parental authority," says Dr. C.N. Alexander Jr., "was associated with frequent drinking, excessive drinking leading to extreme intoxication, and drinking for psychological benefits rather than for social reasons."

But all sorts of personal and family problems may be involved, aside from parent-child disagreements. An extreme example of what may be found is presented by a small group of problem drinkers, aged 13 to 18, treated at the Peter Bent Brigham Hospital in Boston. Many had come to the hospital from training schools for delinquent children. All had become alcoholics even before adolescence, some having had their first drink at age five. "Family life had been marked by gross personal and economic deprivation," says Dr. J.R. MacKay. "Almost all the fathers and some of the mothers were alcoholics. In most cases the father had deserted the family permanently, leaving it in desperate financial straits. . . . In every case the outstanding personality attributes [of the youngsters] were hostility, depression, impulsiveness, and sexual confusion. Self-destructive and homosexual tendencies were apparent in many."

ALCOHOL AND DRUGS

It is not surprising that the use of alcohol and the use of other drugs are closely related and have similar causes. What is remarkable is the fact that, at present, alcohol is taking over from other drugs, including marijuana, in the habits of young people.

While alcoholism treatment facilities only rarely, as yet, receive requests for help from individuals under 21, says Dr. Fox, those who do appear are generally involved in more drug problems than alcohol alone.

"We are seeing an increasing number of young adults who are depending on alcohol as a means of avoiding heroin and other drugs that they had been strung out on as teenagers," Dr. Fox says. "They have a great deal of difficulty taking seriously their dependency on alcohol because they see it as 'Mickey Mouse' as compared to their drug dependency; this in spite of the fact that they are manifesting much more severe withdrawal syndromes, including seizures, hallucinations, and so on."

Some parents reinforce this minimizing of the seriousness of heavy drinking: "I would rather have you drink than be hooked on drugs," is one reaction. One health educator feels that because there is less danger and stigma associated with the use of alcohol than with marijuana, many parents express their relief that their children are not smoking grass anymore but drinking beer and wine, and perhaps hard liquor. They may even encourage alcohol in place of drugs.

drinking among heroin users

Heroin addiction in general is believed to be going down, according to the White House Special Action Office for Drug Abuse. Alcohol addiction is growing. Heroin addicts have been found to be heavy users of alcohol, both before and after treatment.

"Alcoholism is increasingly prevalent among heroin addicts," says Dr. Barry Stimmel of New York's Mount Sinai School of Medicine. Of the first 100 patients enrolled in the medical school's methadone treatment program, 85 related a previous history of high alcohol consumption in addition to heroin.

One group of experts in New York City estimates that 35 percent of the city's half-million or so alcoholics are also narcotics

users. The city's Medical Examiner has found that three or four of every ten addicts who die of overdose have high levels of alcohol in their blood, and that the liver damage once thought due entirely to hepatitis infections from dirty needles is often a result of excessive alcohol intake as well.

More than half the patients at Bellevue who are taking methadone also drink heavily. This number is unusually high, but in his program at Rockefeller Institute, Dr. Vincent Dole estimates that 20 percent of the patients are alcoholics. In other programs, observers have reported at least 18 percent. In his investigation of 24 deaths of patients in methadone maintenance programs, New York's Medical Examiner found that six had died of alcoholism.

...among marijuana users

As for marijuana, notoriously the drug of youth, the National Commission found not only that there are many more drinking than marijuana-smoking youths (6 million as opposed to 3.5 million in its national survey), but that many now use both. Most users of either marijuana or alcohol will use the other substance, according to Raymond P. Shafer, chairman of the Commission. Heavy marijuana smokers are usually heavy drinkers, and youths who start their drug use with alcohol, as most do, often do not give it up when they turn to marijuana or even heroin.

One reason for the increase in alcohol use by drug-minded youth, Dr. Leonard D. Jacobson of the University of Oregon believes, is that drug users have discovered that liquor varies and often strengthens the effects of other mood-altering substances. This is especially true of amphetamines and barbiturates, the effects of which closely parallel those of alcohol, and of cannabis, the hemp family that includes marijuana and hashish. Cannabis and alcohol have been found to be so closely related that there is a cross-tolerance. A strong dose of alcohol affects a heavy marijuana user in much the same way that it does an alcoholic.

Another reason for the increasingly prevalent combination of marijuana and beer or wine is a new acceptability. Among both young and old they are considered less dangerous than "hard" stuff—liquor or drugs. Other factors are the often lax enforcement of existing liquor laws, new laws lowering the drinking age,

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and the influence of beer and wine advertising aimed at young people. Then, too, there's the economics of getting high: "Alcohol is easy to get, and there's a lot of it," says one high-school student. "It takes a lot to buy an ounce [of marijuana], at least $20, and even when you're working part-time, that's a lot of money."

WHAT CAN BE DONE?

What can parents and others concerned about the abuse of alcohol by teenagers do? The answer is not easy to find.

The close relationship with other drug use, for which no one has come up with a truly effective remedy, is not encouraging. Solving the social problems—the poverty, the family disruption, the deprived childhoods, the alcoholism of fathers and mothers—that contribute to alcohol and drug abuse and other delinquency in children is not something that will happen easily or quickly.

Alcohol prohibition by law has been a historic failure. Prohibition by parental dictate is not likely to do better. Indeed, it often makes things worse. As noted above, the opposition of parents, when combined with other moral and religious influences, does keep down the number of young drinkers. But it also makes for teenage rebellion and seems to foster the excessive kind of drinking that does the most damage.

What about treatment? Alcoholics Anonymous is now taking in younger members than ever before, and helping them. Psychiatric and other modes of treatment are also being used. But treatment, while necessary, will not of itself cure the problem of alcoholism among teenagers. As Dr. Chafetz says, "No illness is ever brought under control by treating only the casualties."

prevention

The only effective and sensible course, then, is prevention. Youngsters must somehow be persuaded either not to drink at all or to desist when there is any indication that their drinking is leading to trouble. All other things (family life, living conditions, good relations with parents, school, and so on) being more or less stable, perhaps effective education, of a kind that really takes root in young minds, can do it.

Anti-alcoholism propaganda that consists mostly of posters,

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slogans, and statistics on alcohol-related disasters will not work. Such campaigns have not been effective in dealing with alcohol or general drug abuse or other harmful habits, such as cigarette smoking. For one thing, young people rarely see themselves in the posters, or apply the statistics to their own lives. What is needed is guidance that allows teenagers, and children, too, to learn about alcohol positively, without prejudice, in terms that will enable them to judge for themselves what is best to do and then to do it. Plainly, if young people are to learn either to abstain from alcohol completely or to drink sensibly and with restraint, much depends on those who teach.

abstainers

Parents who wish their children to abstain will have to be abstainers themselves. They must teach by example, by their own lifestyle, as well as by precept. The precepts may relate to moral standards and religion; their effectiveness will depend on how well they are instilled in the youngsters by their parents—again, largely by example and lifestyle.

A few solid facts about alcohol can give reinforcement to the precepts and standards. They must be facts that have meaning as well as believability for young people: the fact, for example,

that an appalling percentage of motor vehicle accidents and deaths involve alcohol. Since most young people drive cars, this will probably strike home.

In addition, to assist young people who are inclined to abstain from alcohol the point must be made that they do not have to drink. They must be given ammunition for their resistance to the pressures of their drinking friends and to the easy acceptance of alcohol in the society around them.

Drinking is not a universal practice, and avoiding it need not be embarrassing or shameful. It is not a measure of adulthood or virility. It is not an effective easer of pain or solution to problems.

safe v. unsafe drinking

Young people who do not choose to abstain from alcohol can be taught to drink responsibly and with relative safety. The difference between safe and unsafe drinking, in the view of Dr. Chafetz, is clearly discernible in the different ways in which people use alcohol and in their attitudes toward it.

"Cultures which use alcohol—and have a low incidence of problems with it—drink in a definite pattern," Dr. Chafetz says. "The beverage is sipped slowly, consumed with food, partaken in the company of others in relaxed, comfortable circumstances. Also, drinking is taken for granted in these cultures and given no special significance. . . . No positive sanction is given to prowess in amounts consumed and drunkenness is condemned."

On the other hand, Dr. Chafetz points out, "Cultures with a high incidence of alcohol problems drink quickly, often without food, often in solitary and uncomfortable circumstances. And drinking tends to have special significance, with guilt, conflict, and ambivalence prevailing as attitudes. In addition, prowess in drinking is supported and intoxication is tolerated."

The lessons for young people are plain: If you drink, drink for pleasure, not to show off. Let alcohol be a part of your enjoyment of food, people, and other good things; don't drink alone and hastily, or out of anger against your parents or the rest of the world. Don't admire quantity consumption; it is not a contest worth winning. "The plain and simple fact is," Dr. Chafetz says, "that every time we are drunk we have overdosed with a drug."

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rules for parents

Here's a set of rules, adapted from material put together by writer Garrett Oppenheim, for parents who want to teach their children how to drink:

1. *Watch your drinking the way your children watch it.* If you show them that you sanction drinking, also show them that you do not over-drink, you do not encourage your guests to over-drink, you admire people who drink sanely, and you deplore drunkenness.
2. *Start your teenagers off with a drink at home.* Make drinking casual, a family pleasure, an unglamorized social activity, not a secret self-indulgence.
3. *Tell teenagers why people drink.* Drinking can make for good fellowship, but it also can be dangerous if people drink to escape from their troubles.
4. *Point up the dangers of alcohol in the here and now.* Threats of degradation and illness in the far-off years of adulthood

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will not impress a youngster, but he may not want to risk being denied his chance to use the family car because he drinks unwisely.

5. *With other parents and youngsters, show a film or hold group discussions on* ***drinking.*** Private lectures to your offspring may not take root, but a discussion with a gathering of his or her friends will give everyone a chance to ask questions and may help to relieve the pressure on your teenager of "the other guys" who drink too much.
6. *Get closer to your kids.* Giving your offspring your attention and love is the best way to keep them out of any kind of trouble, including over-drinking.
7. *Get expert help.* If a youngster's drinking, in spite of all the parents' efforts, becomes a problem, some kind of treatment may be in order. For information about where to get help, consult your local council of the National Council on Alcoholism or Alcoholism Information Center, or write to the National Council on Alcoholism, 2 Park Avenue, New York, N.Y. 10016.

The National Congress of Parents and Teachers also has helpful information; write to their Smoking and Alcohol Education Project, 700 North Rush Street, Chicago, Illinois 60611. For additional educational material on alcohol and teenage drinking, write the National Clearinghouse for Alcohol Information, Box 2345, Rockville, Maryland 20852.

related public affairs pamphlets

Alcoholics and Alcoholism, by Harry Milt, No. 426.
Drug Abuse—What Can Be Done?, by Jules Saltman, No. 390A.
How to Help the Alcoholic, by Pauline Cohen, No. 452.
Parents and Teenagers, by Margaret Hill, No. 490.
The Rights of Teenagers as Patients, by Theodore Irwin, No. 480.
What About Marijuana?, by Jules Saltman, No. 436.

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